

Colorectal Cancer

Colorectal cancer (CRC) is both a high volume and high-risk disease. CRC ranks second among causes of cancer deaths, accounts for approximately 11% of all new cancer cases, and is the third most common cancer among men and women. However, the 5-year relative survival rate is over 90% for people whose CRC is found and treated in Stage I, as compared to 5% for people with Stage IV disease. Unfortunately, less than 30% of cases are detected at an early stage.

Current CRC screening guidelines recommend that veterans over 50 years old should have a:

- Fecal Occult Blood Test (FOBT) series once a year,
- sigmoidoscopy every 5 years, or
- colonoscopy every 10 years.

The VA Office of Quality and Performance reports that 32% of eligible patients fail to receive timely CRC screening nationally. These estimates highlight a tragic gap between best and current CRC screening and surveillance practices. Efforts to address this gap have enormous potential to prevent suffering, reduce morbidity and cancer-related mortality, improve efficiency of resource use, and substantially improve quality of life for a large number of veterans.

The primary mission of the Colorectal Cancer Quality Enhancement Research Initiative (QUERI-CRC) is to reduce incidence, late detection, suffering, and

mortality from CRC among all veterans by promoting the translation of research discoveries and innovations into patient care and systems improvements.

Success at achieving this mission is defined as creating measurable, rapid, and sustainable improvements in colorectal cancer prevention, early detection, treatment, palliative care, and patient-centered outcomes.

Funded in August 2001, the QUERI-CRC is currently focused on foundation-building activities that include: developing a data system for informing, monitoring, and assessing outcomes of screening-promotion translations projects; activities intended to develop a foundation for rapid-cycle organizational change interventions; and the development of functional partnerships with VA researchers, the National Cancer Institute, American Cancer Society, other QUERI groups, and the newly funded NCI CanCORS Steering Committee, among others. QUERI-CRC is also working to develop rapid and responsive dissemination channels such as an evidence-based web site and a semi-annual newsletter, and is conducting pilot activities to inform and promote the development of translation

research projects that target organizational, provider, and patient barriers to screening.

Translating Research into Practice

The first priority of the QUERI-CRC is to develop and begin implementing one or more translation projects that will measure the impact of promoting best CRC screening and colonoscopic follow-up practices. Our current translation efforts in this area are focused on building the foundation for effective interventions and establishing systems for collaboration and dissemination of information. Within the next year, QUERI-CRC will work to:

- Develop a data system for informing, monitoring, and assessing outcomes of screening-promotion translation projects. The basic data elements for this system will come from VA outpatient and lab data, but will be supplemented through additional sponsored projects with Medicare and survey data. Structural, provider, and patient mediators of quality improvement outcomes to be

The QUERI-CRC Executive Committee:

Each QUERI Executive Committee is co-chaired by a research expert and a clinician. The QUERI-CRC Research Coordinator is **Michelle van Ryn, PhD, MPH**, and the Clinical Coordinator is **John Bond, MD**. The QUERI-CRC's Executive Committee also includes: Catherine Borbas, PhD, MSW, Robert Dittus, MD, MPH, Krysten Halek, MA, Mark Helfand, MD, Ronald E. Myers, DSW, PhD, **Melissa Partin, PhD** (Translation Coordinator), Dawn Provenzale, MD, MHSc, David Rothenberger, MD, Philip Schoenfeld, MD, Sally Vernon, PhD, Beth Virnig, PhD, MPH, Tim Wilt, MD, MPH, Elizabeth M. Yano, PhD, and Jane G. Zapka, ScD.

measured include improved patient attitude toward and intention to participate in screening, improved provider recommendation for and follow-up of screening, and improved system capacity for screening and follow-up.

- Develop and begin implementing one or more translation projects geared toward promoting best CRC screening and follow-up practices.

QUERI-CRC Expected Products

The first three years of QUERI-CRC activities are expected to result in a number of products, including:

- A valid, efficient data system for monitoring variations in CRC screening and quality of CRC treatment and assessing impact of quality improvement efforts;
- Sustainable and reproducible strategies for increasing CRC screening and reducing late detection;
- Systematic reviews and reports on best practices for stage-specific CRC treatment;
- Identification of key components of effective translation frameworks and the organizational conditions that result in successful implementation;
- Culturally sensitive programs targeting patient adherence and provision of culturally appropriate care;
- Technical assistance in reproducing strategies in diverse care settings; and
- Widespread dissemination of information through a web site, bi-annual newsletters, publications, and relevant conferences and meetings.

Quality Enhancement Research Initiative

QUERI currently focuses on eight conditions that are prevalent and high-risk among veteran patients: Colorectal Cancer, Chronic Heart Failure, Diabetes, HIV/AIDS, Ischemic Heart Disease, Mental Health, Spinal Cord Injury, and Substance Abuse.

The QUERI Process

The QUERI process includes six steps:

- 1) identify high-risk/high-volume diseases or problems;
- 2) identify best practices;
- 3) define existing practice patterns and outcomes across VA and current variation from best practices;
- 4) identify and implement interventions to promote best practices;
- 5) document that best practices improve outcomes; and
- 6) document that outcomes are associated with improved health-related quality of life and systems improvements.

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VA's Research and Development QUERI Website: <http://www.va.gov/resdev/queri.htm>

CHF QUERI direct web link: <http://www.hsrh.houston.med.va.gov/chfqueri/>